



North Carolina  
State Board of Elections  
441 N Harrington Street  
Raleigh, NC 27603

Kim Westbrook Strach  
Executive Director

Mailing Address  
PO Box 27255  
Raleigh, NC 27611-7255  
(919) 733-7173

**Certification to Close Committee**

This Certification is used to express the intent to close the committee after all funds have been properly disbursed.

This Certification is filed at the Board of Elections office where the committee's campaign reports are filed.

**FILED BY:**

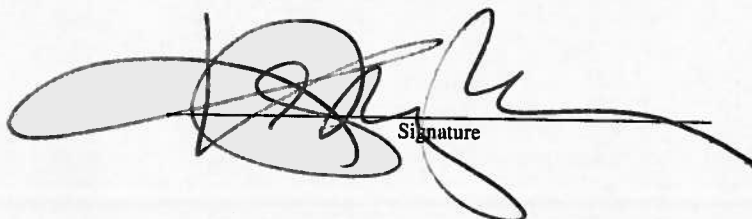
Committee Name: COMITEE TO ELECT KAREN MOSTELLER FOR  
Treasurer Name: SOUTHPORT ALDERMAN  
Treasurer Address: KAREN MOSTELLER  
(include city, state, & zip) 310 N. ATLANTIC AVE  
SOUTHPORT, NC 28461  
  
Treasurer Phone: 910-833-2633

I certify that the above mentioned Committee intends to close and cease existence. Upon signing this certification, I declare that all funds have been distributed and reported (if required). In addition, no contributions will be accepted or disbursements made after the "Final Report" is filed or this form is signed. If the Committee at any future time intends to accept or spend funds in support or opposition of any candidate or ballot issue, a new political committee must be formed and registered with the Board of Elections before such activities may commence.

Committees that have filed under the \$1,000 threshold will only be required to sign this Certification. No "Final Report" will be required for committees meeting this criterion. Any Committee that did not file under the \$1,000 threshold must submit a "Final Report" with this Certification. This report must have a zero balance with no outstanding loans or debts.

1.21.16

Date Signed

  
Signature

# Disclosure Report Cover

Amendment

☐ Yes☒ No

Use this form for general report and committee information, must be signed and submitted along with other detailed forms.  
Do not use this form to update information

## 1. Committee Information

a. Full Name

c. ID Number

Committee to Elect Karen Mosteller for Southport Alderman

QDF21Z

b. Mailing Address (include City, State and Zip Code)

d. Date Filed

310 N. Atlantic Ave  
Southport, NC 28461

e. Phone Number

910-833-2633

2. Report Year

3. Period Start Date (mm/dd/yy)

4. Period End Date  
(mm/dd/yy)

5. Treasurer Full Name

2015

10/19/2015

12/31/2015

Karen Elaine Mosteller

## 6. Type of Committee (Check One)

- ☒ Candidate Campaign  
☐ PAC  
☐ Independent Expenditure  
☐ Legal Expense Fund  
☐ Party  
☐ Referendum  
☐ Joint Fundraiser

## 7. Type of Fund (if applicable, check one)

- ☐ "Booster Fund"  
☐ Building Fund

☒ Other: CAMPAIGN

## 9. Type of Report

(check only one type of report from one category)

Municipal

State/County

Referendum

- ☐ Organizational  
☐ Thirty-five day

- ☐ Organizational  
☐ Quarterly

- ☐ Organizational  
☐ Pre-referendum

- ☐ Pre-primary  
☐ Pre-election  
☐ Pre-runoff  
☐ Semi-annual

- ☐ First  
☐ Second  
☐ Third  
☐ Fourth

- ☐ Final  
☐ Supplemental Final  
☐ Annual  
☐ Special

- ☐ Mid Year  
☒ Year End

- ☐ Semi-annual  
☐ Mid Year  
☐ Year End

- ☒ Final  
☐ Special

- ☐ Final  
☐ Special

## 8. Number of Fundraisers this Report

0

## 10. Special Report Name

## 11. Account Information

a. Financial Institution Full Name

BB&amp;T

b. Purpose

Campaign

c. Account Code

KEM

d. Period Begin Balance

\$ 500.00

## 11. Account Information

a. Financial Institution Full Name

b. Purpose

c. Account Code

d. Period Begin Balance

\$

## CERTIFICATION

I certify that the Committee or Fund is in compliance with all applicable provisions of Article 22A, 22B, & 22D-22M of Chapter 163 of the NC General Statutes and that no funds are commingled with prohibited or other non-disclosed funds. I further certify that this report is complete, true and correct and that I have been trained by the NC State Board of Elections.

KAREN MOSTELLER

Printed Name of Signer

Signature of Appointed Treasurer

Date

1.21.16

## FOR OFFICE USE ONLY

Date Received:

Employee:

Delivery Method

Date Postmarked:

Employee:

☐ Normal Mail

Date Scanned:

Employee:

☐ Registered Mail

Date Data Entered:

Employee:

☒ Hand Delivered☐ Electronically Filed☐ Signer has not received mandatory training

JAN 21 2016

BRUNSWICK COUNTY  
BOARD OF ELECTIONS

**Please Note:** This form cannot be used to amend committee information such as the committee address, treasurer, assistant treasurer, custodian of books information, or account information.

# Detailed Summary

Use this form to summarize all disclosure reporting forms and to total monetary information.

Amendment  
☐ Yes ☒ No

<b>1. Committee Full Name (and Fund if applicable)</b> Committee to Elect Karen Mosteller for Southport Alderman		<b>2. Type of Report</b> Semi-Annual Year End		<b>3. ID Number</b> QDF21Z	
<b>Start of Election Cycle:</b> January 1, 2015		<b>Total this Reporting Period</b>		<b>Total this Election Cycle</b>	
4) Cash on Hand at Start		\$ 500.00		\$ 500.00	

## RECEIPTS

5) Aggregated Contributions from Individuals	(CRO-1205)	\$	\$
6) Contributions from Individuals	(CRO-1210)	\$ 394.87	\$ 3102.22
7) Contributions from Political Party Committees	(CRO-1220)	\$	\$
8) Contributions from Other Political Committees	(CRO-1230)	\$	\$
9) Loan Proceeds	(CRO-1410)	\$	\$
10) Refunds/Reimbursements To the Committee	(CRO-1240)	\$	\$
11) Other Receipt Sources			
11a) Interest on Bank Accounts	(CRO-1250)	\$	\$
11b) Contributions from Not-for-Profit Organizations	(CRO-1250)	\$	\$
11c) Outside Sources of Income	(CRO-1250)	\$	\$
11d) Legal Expense Fund - Other Sources	(CRO-1270)	\$	\$
11 e) Exempt Purchase Price Sales	(CRO-1265)	\$	\$
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d and 11e)		\$ 394.87	\$ 3102.22

## EXPENDITURES

13) Disbursements			
13a) Operating Expenditures	(CRO-1310)	\$ 500.00	\$ 500.00
13b) Contributions to Candidates/Political Committees	(CRO-1310)	\$	\$
13c) Coordinated Party Expenditures	(CRO-1310)	\$	\$
14) Aggregated Non-Media Expenditures	(CRO-1315)	\$	\$
15) Loan Repayments	(CRO-1420)	\$	\$
16) Refunds/Reimbursements From the Committee	(CRO-1320)	\$	\$
17) In-Kind Contributions	(CRO-1510)	\$ 394.87	\$ 3102.22
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)		\$ 394.87	\$ 3102.22
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)		\$ -500.00 (Ken) 0	\$ -500.00 (Ken) 0

## ADDITIONAL INFORMATION

20) Non-Monetary Gifts Given to Other Committees	(CRO-1330)	\$	
21) Outstanding Loans (incl. ones from other campaigns)	(CRO-1430)	\$	
22) Debts and Obligations owed By the Committee	(CRO-1610)	\$	
23) Debts and Obligations owed To the Committee	(CRO-1620)	\$	
24) Account Transfers Within the Committee	(CRO-1720)	\$	
25) Administrative Support	(CRO-1710)	\$	\$
26) Forgiven Loans	(CRO-1440)	\$	\$
27) 48-Hour Notice Reports Sum	(CRO-2200)	\$	\$
28) Contributions to be Refunded	(CRO-1215)	\$ 500.00	\$ 500.00

# Contributions from Individuals

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

Pg 1 of 1 Amendment ☐ Yes ☒ No

<b>1. Committee Full Name (and Fund if applicable)</b>					<b>2. ID Number</b>	
Committee to Elect Karen Mosteller for Southport Alderman					QDF21Z	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)  Karen Mosteller 310 N. Atlantic Avenue Southport, NC 28461			<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
			Architectural Review Coordinator			
			<b>c. Employer's Name/Specific Field</b>		<b>e. Election Sum to Date</b>	
			Bald Head Association		\$ 2652.22	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>	
<input type="checkbox"/>	KEM	Mastercard	Newspaper Ad	10/28/2015	\$ 258.87	
<input type="checkbox"/>	KEM	Mastercard	Newspaper Ad	11/11/2015	\$ 136.00	
<input type="checkbox"/>					\$	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
			<b>c. Employer's Name/Specific Field</b>		<b>e. Election Sum to Date</b>	
					\$	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
			<b>c. Employer's Name/Specific Field</b>		<b>e. Election Sum to Date</b>	
					\$	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<b>4. Total only this Page</b>						
					\$ 394.87	
<b>5. Total of ALL CRO-1210 Pages</b>						
(This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 394.87	

# Contributions to be Reimbursed

Use this form to report Contributions of \$1,000 or less to be reimbursed within 7 days.

Reimbursements must be disclosed on the Refunds/Reimbursements Form (CRO-1320).

Amendment

Pg

1 of 1

☐

Yes

☒

No

<b>1. Committee Full Name</b>		<b>2. ID Number</b>	
The Committee to Elect Karen Mosteller for Southport Alderman		QDF21Z	
<b>3. Contributor Information</b>		<input type="checkbox"/> Add <input type="checkbox"/> Remove	
<b>Full Name &amp; Mailing Address of the Payee (the original vendor)</b>		<b>Full Name &amp; Mailing Address of the Reimbursee (the person to whom the campaign check is written)</b>	
Karen Mosteller 310 N. Atlantic Avenue Southport, NC 28461		Karen Mosteller 310 N. Atlantic Avenue Southport, NC 28461	
<b>a. Contribution Description</b>	<b>b. Date (mm/dd/yyyy)</b>	<b>c. Credit Card Y/N</b>	<b>d. Amount</b>
\$500 donation to open Campaign checking account at BB&T	7/13/2015	N	\$ \$500.00
<b>3. Contributor Information</b>		<input type="checkbox"/> Add <input type="checkbox"/> Remove	
<b>Full Name &amp; Mailing Address of the Payee (the original vendor)</b>		<b>Full Name &amp; Mailing Address of the Reimbursee (the person to whom the campaign check is written)</b>	
<b>a. Contribution Description</b>	<b>b. Date (mm/dd/yyyy)</b>	<b>c. Credit Card Y/N</b>	<b>d. Amount</b>
			\$
<b>3. Contributor Information</b>		<input type="checkbox"/> Add <input type="checkbox"/> Remove	
<b>Full Name &amp; Mailing Address of the Payee (the original vendor)</b>		<b>Full Name &amp; Mailing Address of the Reimbursee (the person to whom the campaign check is written)</b>	
<b>a. Contribution Description</b>	<b>b. Date (mm/dd/yyyy)</b>	<b>c. Credit Card Y/N</b>	<b>d. Amount</b>
			\$
<b>3. Contributor Information</b>		<input type="checkbox"/> Add <input type="checkbox"/> Remove	
<b>Full Name &amp; Mailing Address of the Payee (the original vendor)</b>		<b>Full Name &amp; Mailing Address of the Reimbursee (the person to whom the campaign check is written)</b>	
<b>a. Contribution Description</b>	<b>b. Date (mm/dd/yyyy)</b>	<b>c. Credit Card Y/N</b>	<b>d. Amount</b>
			\$
<b>4. Total only this Page</b>		\$ 500.00	
<b>5. Total of ALL CRO-1215 Pages</b> (This line goes in line 28 of Detailed Summary Page CRO-1100)		\$ 500.00	



# In-Kind Contributions

Pg 1

of 1

Amendment

☐ Yes

☒ No

Use this form to report non-monetary contributions, donations, goods or services provided to the committee or fund.

Use CRO-1215 if In-Kind Contributions were or will be refunded within 7 days.

<b>1. Committee Full Name (and Fund if applicable)</b>		<b>2. ID Number</b>	
Committee to Elect Karen Mosteller for Southport Alderman		QDF21Z	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove			
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>b. Type of Contributor</b>	
Karen Mosteller 310 N. Atlantic Avenue Southport, NC 28461		<input type="checkbox"/> Individual	
		<input checked="" type="checkbox"/> Candidate	
		<input type="checkbox"/> Party	
		<input type="checkbox"/> PAC	
		<input type="checkbox"/> Referendum	
		<input type="checkbox"/> Other Receipt Source	
		<b>c. Comments</b>	
		<b>d. Election Sum to Date</b>	
		\$ 2652.22	
<b>e. Description</b>		<b>f. Date (mm/dd/yyyy)</b>	
Newspaper Ad		10/28/2015	
		\$ 258.87	
Newspaper Ad		11/11/2015	
		\$ 136.00	
		\$	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove			
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>b. Type of Contributor</b>	
		<input type="checkbox"/> Individual	
		<input type="checkbox"/> Candidate	
		<input type="checkbox"/> Party	
		<input type="checkbox"/> PAC	
		<input type="checkbox"/> Referendum	
		<input type="checkbox"/> Other Receipt Source	
		<b>c. Comments</b>	
		<b>d. Election Sum to Date</b>	
		\$	
<b>e. Description</b>		<b>f. Date (mm/dd/yyyy)</b>	
		\$	
		\$	
		\$	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove			
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>b. Type of Contributor</b>	
		<input type="checkbox"/> Individual	
		<input type="checkbox"/> Candidate	
		<input type="checkbox"/> Party	
		<input type="checkbox"/> PAC	
		<input type="checkbox"/> Referendum	
		<input type="checkbox"/> Other Receipt Source	
		<b>c. Comments</b>	
		<b>d. Election Sum to Date</b>	
		\$	
<b>e. Description</b>		<b>f. Date (mm/dd/yyyy)</b>	
		\$	
		\$	
		\$	
<b>4. Total only this Page</b>			
		\$ 394.87	
<b>5. Total of ALL CRO-1510 Pages</b>			
(This line must be on line 17 of Detailed Summary Page CRO-1100)		\$ 394.87	

# Disclosure Report Cover

Amendment

☐ Yes☒ No

Use this form for general report and committee information, must be signed and submitted along with other detailed forms.

Do not use this form to update information

## 1. Committee Information

a. Full Name

Committee to Elect Karen Mosteller for Southport Alderman

c. ID Number

QDF21Z

b. Mailing Address (include City, State and Zip Code)

310 N. Atlantic Ave  
Southport, NC 28461

d. Date Filed

10/21/2015

e. Phone Number

910-833-2633

2. Report Year

2015

3. Period Start Date (mm/dd/yy)

9/28/2015

4. Period End Date  
(mm/dd/yy)

10/19/2015

5. Treasurer Full Name

Karen Elaine Mosteller

## 6. Type of Committee (Check One)

- ☒ Candidate Campaign  
☐ PAC  
☐ Independent Expenditure  
☐ Legal Expense Fund  
☐ Party  
☐ Referendum  
☐ Joint Fundraiser

## 7. Type of Fund (if applicable, check one)

- ☐ "Booster Fund"  
☐ Building Fund

☒ Other: **CAMPAIGN**

## 8. Number of Fundraisers this Report

0

## 9. Type of Report (check only one type of report from one category)

Municipal

- ☐ Organizational  
☐ Thirty-five day

☐ Pre-primary☒ Pre-election☐ Pre-runoff☐ Semi-annual☐ Mid Year☐ Year End☐ Final☐ Special

State/County

- ☐ Organizational  
☐ Quarterly

☐ First☐ Second☐ Third☐ Fourth☐ Semi-annual☐ Mid Year☐ Year End☐ Final☐ Special

Referendum

- ☐ Organizational  
☐ Pre-referendum

☐ Final☐ Supplemental Final☐ Annual☐ Special

## 10. Special Report Name

## 11. Account Information

a. Financial Institution Full Name

BB&amp;T

b. Purpose

Campaign

c. Account Code

KEM

d. Period Begin Balance

\$ 500.00

## 11. Account Information

a. Financial Institution Full Name

b. Purpose

c. Account Code

d. Period Begin Balance

\$

## CERTIFICATION

I certify that the Committee or Fund is in compliance with all applicable provisions of Article 22A, 22B, & 22D-22M of Chapter 163 of the NC General Statutes and that no funds are commingled with prohibited or other non-disclosed funds. I further certify that this report is complete, true and correct and that I have been trained by the NC State Board of Elections.

**KAREN MOSTELLER**  
Printed Name of Signer

*[Signature]*  
Signature of Appointed Treasurer

**10/21/15**  
Date

## FOR OFFICE USE ONLY

Date Received: \_\_\_\_\_

Employee: \_\_\_\_\_

Date Postmarked: \_\_\_\_\_

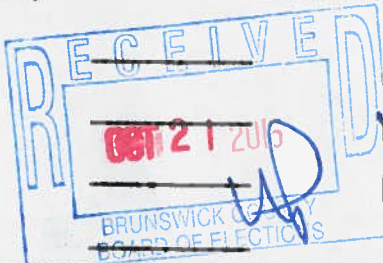
Employee: \_\_\_\_\_

Date Scanned: \_\_\_\_\_

Employee: \_\_\_\_\_

Date Data Entered: \_\_\_\_\_

Employee: \_\_\_\_\_



## Delivery Method

- ☐ Normal Mail  
☐ Registered Mail  
☐ Hand Delivered  
☐ Electronically Filed  
☐ Signer has not received mandatory training

**Please Note:** This form cannot be used to amend committee information such as the committee address, treasurer, assistant treasurer, custodian of books information, or account information.

# Detailed Summary

Amendment



Yes



No

Use this form to summarize all disclosure reporting forms and to total monetary information.

<b>1. Committee Full Name (and Fund if applicable)</b>		<b>2. Type of Report</b>		<b>3. ID Number</b>	
Committee to Elect Karen Mosteller for Southport Alderman				QDF21Z	
<b>Start of Election Cycle:</b>		<b>January 1,</b>		<b>2015</b>	
		<b>Total this Reporting Period</b>		<b>Total this Election Cycle</b>	
<b>4) Cash on Hand at Start</b>		\$ 500.00		\$ 500.00	
<b>RECEIPTS</b>					
<b>5) Aggregated Contributions from Individuals</b>		(CRO-1205)		\$	
<b>6) Contributions from Individuals</b>		(CRO-1210)		\$ 1024.28	
<b>7) Contributions from Political Party Committees</b>		(CRO-1220)		\$	
<b>8) Contributions from Other Political Committees</b>		(CRO-1230)		\$	
<b>9) Loan Proceeds</b>		(CRO-1410)		\$	
<b>10) Refunds/Reimbursements To the Committee</b>		(CRO-1240)		\$	
<b>11) Other Receipt Sources</b>					
<b>11a) Interest on Bank Accounts</b>		(CRO-1250)		\$	
<b>11b) Contributions from Not-for-Profit Organizations</b>		(CRO-1250)		\$	
<b>11c) Outside Sources of Income</b>		(CRO-1250)		\$	
<b>11d) Legal Expense Fund – Other Sources</b>		(CRO-1270)		\$	
<b>11 e) Exempt Purchase Price Sales</b>		(CRO-1265)		\$	
<b>12) TOTAL RECEIPTS</b> (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d and 11e)		\$ 1024.28		\$ 2707.35	
<b>EXPENDITURES</b>					
<b>13) Disbursements</b>					
<b>13a) Operating Expenditures</b>		(CRO-1310)		\$	
<b>13b) Contributions to Candidates/Political Committees</b>		(CRO-1310)		\$	
<b>13c) Coordinated Party Expenditures</b>		(CRO-1310)		\$	
<b>14) Aggregated Non-Media Expenditures</b>		(CRO-1315)		\$	
<b>15) Loan Repayments</b>		(CRO-1420)		\$	
<b>16) Refunds/Reimbursements From the Committee</b>		(CRO-1320)		\$	
<b>17) In-Kind Contributions</b>		(CRO-1510)		\$ 1024.28	
<b>18) TOTAL EXPENDITURES</b> (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)		\$ 1024.28		\$ 2707.35	
<b>19) Cash on Hand at End</b> (Add lines 4 and 12 together, then subtract line 18)		\$ 500.00		\$ 500.00	
<b>ADDITIONAL INFORMATION</b>					
<b>20) Non-Monetary Gifts Given to Other Committees</b>		(CRO-1330)		\$	
<b>21) Outstanding Loans (incl. ones from other campaigns)</b>		(CRO-1430)		\$	
<b>22) Debts and Obligations owed By the Committee</b>		(CRO-1610)		\$	
<b>23) Debts and Obligations owed To the Committee</b>		(CRO-1620)		\$	
<b>24) Account Transfers Within the Committee</b>		(CRO-1720)		\$	
<b>25) Administrative Support</b>		(CRO-1710)		\$	
<b>26) Forgiven Loans</b>		(CRO-1440)		\$	
<b>27) 48-Hour Notice Reports Sum</b>		(CRO-2200)		\$	
<b>28) Contributions to be Refunded</b>		(CRO-1215)		\$	



# Contributions from Individuals

Pg 1 of 1

Amendment

☐ Yes ☒ No

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

<b>1. Committee Full Name (and Fund if applicable)</b>					<b>2. ID Number</b>	
Committee to Elect Karen Mosteller for Southport Alderman					QDF21Z	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
Karen Mosteller 310 N. Atlantic Avenue Southport, NC 28461			Architectural Review Coordinator			
			<b>c. Employer's Name/Specific Field</b>			
			Bald Head Association			
					<b>e. Election Sum to Date</b>	
					\$ 2257.35	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>		<b>k. Amount</b>
<input type="checkbox"/>	KEM	Mastercard	Campaign Signs	10/12/2015		\$ 447.40
<input type="checkbox"/>	KEM	Mastercard	Newspaper Ad	10/14/2015		\$ 76.50
<input type="checkbox"/>	KEM	Mastercard	Newspaper Ad	10/19/2015		\$ 250.38
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
Jane Baldridge 310 N. Atlantic Avenue Southport, NC 28461			Marketing Advisor/ Graphic Designer		Donated 2 hours of graphic time created 2 ads	
			<b>c. Employer's Name/Specific Field</b>			
			Artspeaks Freelance Graphic Design			
					<b>e. Election Sum to Date</b>	
					\$ 400.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>		<b>k. Amount</b>
<input type="checkbox"/>	KEM	In Kind	Graphic design	10/14/2015		\$ 100.00
<input type="checkbox"/>	KEM	In Kind	Graphic design	10/19/2015		\$ 100.00
<input type="checkbox"/>						\$
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
Pam Rainey 318 Marina View Drive Southport, NC 28461			Real Estate Broker		Provided refreshments for meet & greet	
			<b>c. Employer's Name/Specific Field</b>			
			Atlantic Realty Professionals/ Real Estate Sales			
					<b>e. Election Sum to Date</b>	
					\$ 50.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>		<b>k. Amount</b>
<input type="checkbox"/>	KEM	In Kind	Refreshments	10/18/2015		\$ 50.00
<input type="checkbox"/>						\$
<input type="checkbox"/>						\$
<b>4. Total only this Page</b>					\$ 1024.28	
<b>5. Total of ALL CRO-1210 Pages</b>					\$ 1024.28	
<i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>						

**In-Kind Contributions**

Pg

1

of

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Amendment

☐ Yes☒ No

Use this form to report non-monetary contributions, donations, goods or services provided to the committee or fund.

Use CRO-1215 if In-Kind Contributions were or will be refunded within 7 days.

<b>1. Committee Full Name (and Fund if applicable)</b>		<b>2. ID Number</b>	
Committee to Elect Karen Mosteller for Southport Alderman		QDF21Z	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove			
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>b. Type of Contributor</b>	
Karen Mosteller 310 N. Atlantic Avenue Southport, NC 28461		<input type="checkbox"/> Individual	
		<input checked="" type="checkbox"/> Candidate	
		<input type="checkbox"/> Party	
		<input type="checkbox"/> PAC	
		<input type="checkbox"/> Referendum	
		<input type="checkbox"/> Other Receipt Source	
		<b>c. Comments</b>	
		<b>d. Election Sum to Date</b>	
		\$ 2257.35	
<b>e. Description</b>		<b>f. Date (mm/dd/yyyy)</b>	
Campaign Signs (100)		10/12/2015	
		\$ 447.40	
Newspaper Ad (1)		10/14/2015	
		\$ 76.50	
Newspaper Ads (2)		10/19/2015	
		\$ 250.38	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove			
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>b. Type of Contributor</b>	
Jane Baldrige P.O. Box 10932 Southport, NC 28461		<input checked="" type="checkbox"/> Individual	
		<input type="checkbox"/> Candidate	
		<input type="checkbox"/> Party	
		<input type="checkbox"/> PAC	
		<input type="checkbox"/> Referendum	
		<input type="checkbox"/> Other Receipt Source	
		<b>c. Comments</b>	
		<b>d. Election Sum to Date</b>	
		\$ 400.00	
<b>e. Description</b>		<b>f. Date (mm/dd/yyyy)</b>	
Designed and provided finished artwork for newspaper ad		10/14/2015	
		\$ 100.00	
Designed and provided finished artwork for newspaper ad		10/19/2015	
		\$ 100.00	
		\$	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove			
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>b. Type of Contributor</b>	
Pam Rainey 318 Marina View Drive Southport, NC 28461		<input checked="" type="checkbox"/> Individual	
		<input type="checkbox"/> Candidate	
		<input type="checkbox"/> Party	
		<input type="checkbox"/> PAC	
		<input type="checkbox"/> Referendum	
		<input type="checkbox"/> Other Receipt Source	
		<b>c. Comments</b>	
		<b>d. Election Sum to Date</b>	
		\$ 50.00	
<b>e. Description</b>		<b>f. Date (mm/dd/yyyy)</b>	
Provided refreshments for meet & greet gathering		10/18/2015	
		\$ 50.00	
		\$	
		\$	
<b>4. Total only this Page</b>		\$ 1024.28	
<b>5. Total of ALL CRO-1510 Pages</b> (This line must be on line 17 of Detailed Summary Page CRO-1100)		\$ 1024.28	

# Contributions from Individuals

Pg 1 of 1 Amendment ☐ Yes ☒ No

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

<b>1. Committee Full Name (and Fund if applicable)</b>				<b>2. ID Number</b>	
Committee to Elect Karen Mosteller for Southport Alderman				QDF21Z	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
Karen Mosteller 310 N. Atlantic Avenue Southport, NC 28461		Architectural Review Coordinator			
		<b>c. Employer's Name/Specific Field</b>			
		Bald Head Association			
				<b>e. Election Sum to Date</b>	
				\$ 774.28	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>
<input type="checkbox"/>	KEM	Mastercard	Campaign Signs	10/12/2015	\$ 447.40
<input type="checkbox"/>	KEM	Mastercard	Newspaper Ad	10/14/2015	\$ 76.50
<input type="checkbox"/>	KEM	Mastercard	Newspaper Ad	10/19/2015	\$ 250.38
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
Jane Baldrige 310 N. Atlantic Avenue Southport, NC 28461		Marketing Advisor/ Graphic Designer		Donated 2 hours of graphic time created 2 ads	
		<b>c. Employer's Name/Specific Field</b>			
		Artspeaks Freelance Graphic Design			
				<b>e. Election Sum to Date</b>	
				\$ 200.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>
<input type="checkbox"/>	KEM	In Kind	Graphic design	10/14/2015	\$ 100.00
<input type="checkbox"/>	KEM	In Kind	Graphic design	10/19/2015	\$ 100.00
<input type="checkbox"/>					\$
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
Pam Rainey 318 Marina View Drive Southport, NC 28461		Real Estate Broker		Provided refreshments for meet & greet	
		<b>c. Employer's Name/Specific Field</b>			
		Atlantic Realty Professionals/ Real Estate Sales			
				<b>e. Election Sum to Date</b>	
				\$ 50.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>
<input type="checkbox"/>	KEM	In Kind	Refreshments	10/18/2015	\$ 50.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
<b>4. Total only this Page</b>				\$ 1024.28	
<b>5. Total of ALL CRO-1210 Pages</b> (This line must be on line 6 of Detailed Summary Page CRO-1100)				\$ 1024.28	

# In-Kind Contributions

Pg 1 of 1 Amendment ☐ Yes ☒ No

Use this form to report non-monetary contributions, donations, goods or services provided to the committee or fund.  
Use CRO-1215 if In-Kind Contributions were or will be refunded within 7 days.

<b>1. Committee Full Name (and Fund if applicable)</b>		<b>2. ID Number</b>	
Committee to Elect Karen Mosteller for Southport Alderman		QDF21Z	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove			
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>b. Type of Contributor</b>	
Karen Mosteller 310 N. Atlantic Avenue Southport, NC 28461		<input type="checkbox"/> Individual <input checked="" type="checkbox"/> Candidate <input type="checkbox"/> Party <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Other Receipt Source	
		<b>c. Comments</b>	
		<b>d. Election Sum to Date</b> \$ 774.28	
<b>e. Description</b>		<b>f. Date (mm/dd/yyyy)</b>	<b>g. Fair Market Amount</b>
Campaign Signs (100)		10/12/2015	\$ 447.40
Newspaper Ad (1)		10/14/2015	\$ 76.50
Newspaper Ads (2)		10/19/2015	\$ 250.38
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove			
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>b. Type of Contributor</b>	
Jane Baldrige P.O. Box 10932 Southport, NC 28461		<input checked="" type="checkbox"/> Individual <input type="checkbox"/> Candidate <input type="checkbox"/> Party <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Other Receipt Source	
		<b>c. Comments</b>	
		<b>d. Election Sum to Date</b> \$ 200.00	
<b>e. Description</b>		<b>f. Date (mm/dd/yyyy)</b>	<b>g. Fair Market Amount</b>
Designed and provided finished artwork for newspaper ad		10/14/2015	\$ 100.00
Designed and provided finished artwork for newspaper ad		10/19/2015	\$ 100.00
			\$
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove			
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>b. Type of Contributor</b>	
Pam Rainey 318 Marina View Drive Southport, NC 28461		<input checked="" type="checkbox"/> Individual <input type="checkbox"/> Candidate <input type="checkbox"/> Party <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Other Receipt Source	
		<b>c. Comments</b>	
		<b>d. Election Sum to Date</b> \$ 50.00	
<b>e. Description</b>		<b>f. Date (mm/dd/yyyy)</b>	<b>g. Fair Market Amount</b>
Provided refreshments for meet & greet gathering		10/18/2015	\$ 50.00
			\$
			\$
<b>4. Total only this Page</b>		\$ 1024.28	
<b>5. Total of ALL CRO-1510 Pages</b> (This line must be on line 17 of Detailed Summary Page CRO-1100)		\$ 1024.28	



# In-Kind Contributions

Pg

of

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Amendment

☐ Yes

☒ No

Use this form to report non-monetary contributions, donations, goods or services provided to the committee or fund.

Use CRO-1215 if In-Kind Contributions were or will be refunded within 7 days.

<b>1. Committee Full Name (and Fund if applicable)</b>		<b>2. ID Number</b>	
Committee to Elect Karen Mosteller for Southport Alderman		QDF21Z	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove			
<b>a. Full Name, Mailing Address &amp; Phone</b> (Include city, state, & zip)		<b>b. Type of Contributor</b>	
Jane Baldrige P.O. Box 10932 Southport, NC 28461		<input checked="" type="checkbox"/> Individual	
		<input type="checkbox"/> Candidate	
		<input type="checkbox"/> Party	
		<input type="checkbox"/> PAC	
		<input type="checkbox"/> Referendum	
		<input type="checkbox"/> Other Receipt Source	
		<b>c. Comments</b>	
		Donated 2 hours of marketing and graphic time	
		<b>d. Election Sum to Date</b>	
		\$ 200.00	
<b>e. Description</b>		<b>f. Date (mm/dd/yyyy)</b>	
Designed and provided finished artwork for printed materials		9/4/2015	
		<b>g. Fair Market Amount</b>	
		\$ 200.00	
		\$	
		\$	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove			
<b>a. Full Name, Mailing Address &amp; Phone</b> (Include city, state, & zip)		<b>b. Type of Contributor</b>	
		<input type="checkbox"/> Individual	
		<input type="checkbox"/> Candidate	
		<input type="checkbox"/> Party	
		<input type="checkbox"/> PAC	
		<input type="checkbox"/> Referendum	
		<input type="checkbox"/> Other Receipt Source	
		<b>c. Comments</b>	
		<b>d. Election Sum to Date</b>	
		\$	
<b>e. Description</b>		<b>f. Date (mm/dd/yyyy)</b>	
		<b>g. Fair Market Amount</b>	
		\$	
		\$	
		\$	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove			
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>b. Type of Contributor</b>	
		<input type="checkbox"/> Individual	
		<input type="checkbox"/> Candidate	
		<input type="checkbox"/> Party	
		<input type="checkbox"/> PAC	
		<input type="checkbox"/> Referendum	
		<input type="checkbox"/> Other Receipt Source	
		<b>c. Comments</b>	
		<b>d. Election Sum to Date</b>	
		\$	
<b>e. Description</b>		<b>f. Date (mm/dd/yyyy)</b>	
		<b>g. Fair Market Amount</b>	
		\$	
		\$	
		\$	
<b>4. Total only this Page</b>		\$ 200.00	
<b>5. Total of ALL CRO-1510 Pages</b> (This line must be on line 17 of Detailed Summary Page CRO-1100)		\$ 1678.07	